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FEE TRANSMITTAL FOR FY 2006 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT Chock Credit Card Money Order None Other (please identify): Tory Chock Credit Card Money Order None Other (please identify): To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified deposit account, the Director is hereby authorized to: (check all that apply) To the above-identified the provided to a surcharge. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES FILING FEES Small Entity Application Type Fee (\$) Fe					Complete if Known				
Filing Date October 3, 2003 First Named Inventor Martin QUIBELL Examiner Name S. Young An Unit 1626 TOTAL AMOUNT OF PAYMENT (s) 1,020.00 Attorney Docket No. 1718-0208P METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order October No. 1718-0208P METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order October No. 1718-0208P METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge engly additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (s)	1								
Applicant claims small entity status See 37 CFR 1.27 Art Unit 1626									
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4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00									
SUBMITTED BY	SUBMITTED BY	\ .	£ subs s						
Signature Registration No. (Attorney/Agent) 30,330 Telephone (858) 792-8855	Signature	1-	47,604			0 Telephone	(858) 792-885	55	
Name (Print/Type) Leonard R. Svensson Date November 1, 2006									